

K-12 Schools and Early Care and Education (ECE) Program Operational Guidance

This guidance can help K-12 school and ECE program administrators support safe, in-person learning for K-12 schools, and keep ECE programs open, while managing the spread of COVID-19. Based on the [COVID-19 Community Levels](#), this guidance provides flexibility so schools and ECE programs can adapt to changing local situations, including periods of increased community health impacts from COVID-19.

Recommendations for All COVID-19 Community Levels

- Everyone who is eligible for a COVID-19 vaccine, should stay [up-to-date](#) on vaccination.
- Schools and ECE programs should take [additional steps](#) to increase outdoor air intake and improve air filtration.
- Anyone with COVID-19 symptoms, regardless of vaccination status, should be tested for COVID-19.
 - If a rapid antigen test is negative, a symptomatic person should seek confirmatory PCR testing.
 - If confirmatory testing is negative, they can return to school as long as they meet return-to-school requirements (e.g., 24-hours fever-free without the use of fever-reducing medication).
 - If confirmatory testing is positive, the symptomatic person has COVID-19 and should complete at-home isolation.
- Anyone who tests positive by viral test (antigen or PCR) for COVID-19, regardless of vaccination status, should complete [at-home isolation](#).
- Anyone who is identified as a close contact to a COVID-19 case should follow the appropriate [masking/quarantine guidance](#).
- Schools and ECE programs should teach and reinforce proper handwashing to lower the risk of spreading viruses. Hand hygiene should be monitored and reinforced during key times in the day (e.g., before and after eating and after recess).
- Schools and ECE programs should teach and reinforce covering coughs and sneezes to help keep individuals from getting and spreading infectious diseases.
- Schools and ECE programs should clean surfaces at least once a day to reduce the risk of germs spreading by touching surfaces. If a facility has had a sick person or someone who tested positive for COVID-19 within the last 24 hours, the space should be [cleaned and disinfected](#). Additionally, ECE programs should follow recommended procedures for cleaning, sanitizing, and disinfection in their setting such as after diapering, feeding, and exposure to bodily fluids.
- Schools can consider screening testing for high-risk activities such as indoor sports and extracurricular activities.

Recommendations for Medium and High COVID-19 Community Levels or During Outbreaks**Masking**

Wearing a well-fitted mask consistently and correctly reduces the risk of spreading the virus that causes COVID-19. Universal indoor mask use is recommended at a high COVID-19 Community Level and when experiencing a [COVID-19 outbreak](#). People at risk for getting very sick with COVID-19 should also wear masks or respirators that provide greater protection, such as N95s or KN95s.

At a medium COVID-19 Community Level, people who are immunocompromised or at risk for getting very sick with COVID-19 should talk to their healthcare provider about the need to wear a mask.

Schools can also choose to implement universal masking at any COVID-19 Community Level. Anyone who chooses to wear a mask should be supported in their decision to do so at any COVID-19 Community Level, including low.

Screening Testing

Screening testing identifies people with COVID-19 who do not have symptoms or known or suspected exposures, so that steps can be taken to prevent further spread of COVID-19.

Schools can implement screening testing at any COVID-19 Community Level, but should especially be considered at medium and high COVID-19 Community Levels. Schools can maintain a screening testing infrastructure at low COVID-19 Community Levels that may be scaled up during higher levels.

Cohorting

Cohorting is the practice of keeping people together in a small group and having each group stay together throughout the day, while minimizing contact between cohorts. In areas with a high COVID-19 Community Level, this can be used to limit the number of people who come in contact with each other.

In areas with high COVID-19 Community Levels, schools and ECE programs can also discourage crowding indoors to reduce the risk of spreading COVID-19.

High-Risk Activities

Due to increased and forceful exhalation that occurs during physical activity, some sports can put players, coaches, trainers, and others at increased risk for getting and spreading the virus that causes COVID-19. Close contact sports and indoor sports are particularly risky. Similar risks may exist for other extracurricular activities, such as band, choir, theater, and other school clubs that meet indoors and entail increased exhalation.

Schools and ECE programs may consider temporarily stopping these activities to control a school or program-associated outbreak, or during periods of high COVID-19 Community Level.

K-12 Schools and Early Care and Education (ECE) COVID-19 Outbreaks and Reporting

K-12 schools should report weekly aggregate case counts and core group outbreaks to the LDH COVID-19 Reporting Portal. If school systems need to be enrolled in the LDH COVID-19 Reporting Portal, please email SchoolCOVIDreporting@la.gov.

Early Care and Education (ECE) programs should report outbreaks to their regional epidemiologist.

Definitions

Core group outbreak: At least three (3) student, teacher, or staff cases within a specified core group with symptom onset or positive test result within 14 days of each other, **AND NO likely known exposure to a case outside of the school setting (e.g., household).**

- **Core group:** A core group includes but is not limited to extracurricular activity, classroom, cohort group, before/after school care, etc.

School-wide outbreak: 5% or more students, teachers, and staff with confirmed or suspected COVID-19 over a 14-day period

Outbreak conclusion: An outbreak is considered over when there have been 14 days without any new cases.

Use the below tool for each core group where multiple cases have been identified to determine if you have an outbreak(s).

Determining If You Have an Outbreak in a Core Group		
Question	Response	Interpretation
1a. How many cases have been identified in the core group?		<ul style="list-style-type: none"> • If 3 or more cases, then continue to question 2. • If less than 3 cases, then this is not an outbreak.
2. Do cases have a symptom onset or positive test result within 14 days of each other?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<ul style="list-style-type: none"> • If no, remove the cases that don't meet this criteria from your case count.
3. Do any of the cases have a known exposure to a case outside of the school setting? (Note: if exposure to another case outside of the school setting is unknown, the case should be counted toward the school-associated outbreak)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<ul style="list-style-type: none"> • If yes, remove the cases with exposure to a case outside of the school setting from your case count.
4. After removing cases that don't meet the criteria in questions 2 and 3 are there still at least 3 cases in the core group?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<ul style="list-style-type: none"> • If yes, then this is a core group outbreak. • If no, then this is not an outbreak.